

don't know what I am going to do when it comes down till I push the button. But I do think the issue is important enough. I do know the storm is here. We need to be going down into the shelters because when you get to the type of cuts that we are looking at without some sort of funding mechanism, we are in deep, deep trouble. And I go back to this session when I was think about the body not being able to reduce \$25,000 for the Athletic Commission. We couldn't do that. Senator Ashford had a bill that, LB 1272, that would have freed up 1.7 and it was a policy decision, and the policy decision was, is this, if we have to begin reducing spending to make things that are a real priority, this is one that we could do, that it would be tough but we could do. The body chose not to do that. I look at the body, and what we have chosen to do in trying to cut, and I can look back...look forward to next year when we are looking at 30, 70, maybe 100 million dollars over a biennium, and I see some real, real problems arising. I yield the rest of my time to Senator Hall.

SPEAKER BAACK: On the motion to reconsider, Senator Hall.

SENATOR HALL: Thank you, Mr. Speaker, members. I don't want to take any time, any more time than necessary on this issue. Again I can't, I guess, impress upon you how important this is to furthering this debate on the Medicaid reimbursement, the lawsuit and everything else that is involved there. It only applies to new certificate of need applications, anybody who is in the mix right now, and that was much of the problem or misunderstanding, I apologize, I didn't do a good job of explaining the amendment. What the amendment does is say that from the effective date of this act there won't be any new CONs that are approved for one year. If someone already has the project approved but hasn't started, it doesn't pull back the reins on them. It just says on a going forward basis for one year while we examine this whole issue of health care costs as they affect the state, as they affect local government, as they affect service provider and patient, we need to have a hold on what we are going to do in terms of CON, new construction types of projects. That is what I am asking, and it only applies to Lincoln and Omaha. There is no intent on my part at any point in the future to say that we should expand this to the balance of the state. Frankly in the health care industry, unfortunately, the balance of the state takes a back seat to Omaha and Lincoln. That is not in the best interest, I don't think, of the citizens of the state, but that is the fact of the